

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HA	330	2/8
O.I.P.E. CLASSIFIER		49	2/10/99
FORMALITY REVIEW	QWB	10976	2-18-99

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Date
1	9-8-99
2	2-9-00
3	8-1-00
4	10-2-00
5	3-2-01
6	5-16-04
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22	✓
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47	✓
48	✓
49	✓
50	✓

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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